PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								ALL EN		OR	OTHER SMALL		
TOTAL CLAIMS							F	ME	FEE] [RATE	FEE	
FOR			NUMBER FILED NUMBE			ER EXTRA	BA	SIC FEE	355.00	OR	Basic Fee	710.00	
TOTAL CHARGEABLE CLAIMS			// minus 20= ' -				X\$ 9=			OR	X\$18=	1	
INDEPENDENT CLAIMS			/ minus 3 =				7	(40 =	/	OR	X80=	1	
MULTIPLE DEPENDENT CLAIM PRESENT							T	135=	1/	OR	+270=	1	
* If the difference in column 1 is less than zero, enter "0" in column 2								OTAL		OR	TOTAL	712	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							S	MALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
OME	lotal	· 14	Minus	9	9	-17	7	(\$ 9=		OR	X\$18=	1	
	ndependent	. 6	Minus		6	-62	1	(40=		OR	X80=	7	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							135=		OR	+270=		
12/02/05								TOTAL DIT. FEE			TOTAL ADDIT. FEE		
AMENDMENT B	#171	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	MN 2) HESY (BER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	<i>a</i>
	Total	. 18	Minus	- 2	(Q)	-8		(\$ 9=	1	OR	X\$18=	4090	195
	Independent	. (12)	Minus	(0	· 4	7	(40=	7	OR	X80=	800	00
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							•	135=	//	OR	+270=	2	1
and the second s								. YOTAL DIT. FEE		OR	ADDIT. FEE	1000	,00
<u> </u>	-:	(Column 1)			mn 2) HEST	(Column 3)			·]
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	ABER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		PATE	ADDI- TIONAL FEE	
Ş	Total	•	Minus	••		0	}	(\$ 9=		OR	X\$18=		
	Independent	•	Minus	•••	701	-		(40⇒		OR	X80=		
		NTATION OF M					١,	135=		OR	+270=		
1	"If the entry in column 1 is less than the entry in column 2, write "O" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number bound in the appropriate box in column 1.												

FORM PTO-67

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